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LETTER DATED 20 FEBRUARY 1998 FROM THE SECRETARY-GENERAL ADDRESSED TO THE PRESIDENT OF THE SECURITY COUNCIL

The Security Council, at its informal consultations on 22 December 1997, requested the Secretariat to prepare a specific technical analysis of the humanitarian situation in Sierra Leone since the coup d'etat, including the effects of the imposition of sanctions. An inter-agency assessment mission led by the Office for the Coordination of Humanitarian Affairs was sent to the region to undertake such analysis. However, because of the deterioration of the security conditions in Sierra Leone, the mission worked in Conakry and prepared an interim report, drawing on information and analysis provided by United Nations agencies, the International Committee of the Red Cross and non-governmental organizations active in Sierra Leone.

I would like therefore to make available to you, and through you to the members of the Security Council, the interim report of the inter-agency mission. I would like, in particular, to draw the attention of the Council to the recommendations of the report. I am confident that these recommendations will receive the full consideration of the members of the Council.

(Signed) Kofi A. ANNAN

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Annex

Interim report of the inter-agency mission to Sierra Leone

I. Introduction

1. The UN Security Council in its informal consultations on 22 December 1997 requested a technical analysis of the humanitarian situation in Sierra Leone since the coup d'état , including the effect of the imposition of UN sanctions and ECOWAS embargo. In light of the difficulties encountered by humanitarian agencies in providing assistance to vulnerable groups in Sierra Leone under the sanctions regime and ECOWAS embargo, the Emergency Relief Coordinator (ERC) sent an expert mission to the region. The inter-agency mission, currently in Guinea, aims at assessing the humanitarian situation in Sierra Leone and measuring to what extent this situation has deteriorated under the UN sanctions and ECOWAS embargo, particularly in terms of the delivery of humanitarian assistance. The mission is expected to recommend practical steps to facilitate the provision of humanitarian assistance in Sierra Leone, and the monitoring of the humanitarian impact of the sanctions and ECOWAS embargo. The inter-agency mission is composed of Claude Bruderlein, team leader, Office for the Coordination of Humanitarian Affairs (OCHA), Mr. Adeel Ahmed (OCHA), Dr. Anne Vincent (UNICEF), Mr. Imran Riza (UNHCR), Dr. Idrissa Sow (WHO), Mr. Mamadou M'Baye (WFP) and Mr. Modem Lawson-Betum (OSESG).

2. The mission arrived in Conakry, Guinea on 5 February 1998 and was scheduled to visit Freetown and other areas of Sierra Leone from 9 to 16 February 1998. During the mission's initial consultations in Conakry with UN agencies and NGOs the security situation in Sierra Leone deteriorated significantly with the intensification of armed confrontations in several areas of the country between AFRC and ECOMOG forces in the Freetown area, and around the provincial towns of Bo and Kenema with Civil Defense Units, known as Kamajors. These military developments are presently preventing the mission from entering Sierra Leone and will continue to do so for the immediate future. The increased military activity has heightened the need for the supply of vital humanitarian assistance to the humanitarian agencies and organizations engaged in Sierra Leone. Consequently, the mission has prepared this interim report. This report provides to the ERC the latest information about the humanitarian situation in Sierra Leone and the mission's preliminary recommendations for the urgent delivery of humanitarian assistance to the population affected by the hostilities under the UN sanctions regime and the ECOWAS embargo.

3. The United Nations ranks Sierra Leone as the second least developed nation, after Niger. Per capita income stands at $160 a year; life expectancy at 43 years. After a five-year long civil war that killed over 10,000 people and displaced several hundred thousands of people, the democratically-elected President Tejan Kabbah signed a peace treaty with the Revolutionary United Front (RUF) on November 1996. A major program of resettlement of displaced persons was undertaken and significant distribution of rice seeds were performed with the support of UN agencies, donors, and humanitarian NGOs. However, further tensions within the military led to a military coup d'état on 25 May 1997. On 25 August 1997, the Economic Community of West African States (ECOWAS) responded to the overthrow of the elected President Kabbah, now in exile in Guinea, by imposing a full embargo on Sierra Leone, including on humanitarian food assistance to Sierra Leone, unless exempted through an appeal process.

4. Violence continued after the military coup of 25 May, causing much suffering among civilians and provoking further displacement of population. On 8 October 1997, the UN Security Council expressed in its resolution 1132 "*its strong support for the efforts of ECOWAS to resolve the crisis in Sierra Leone*". It further decided to impose limited sanctions on Sierra Leone on the importation of fuel and other petroleum product, weapons and other related military material and to prevent travel abroad by the members of the military junta and their families. A regime of humanitarian exemptions for fuel import has been elaborated under the resolution. The Council authorized ECOWAS, in cooperation with the Kabbah Government, to ensure the implementation of the UN sanctions. However, it insisted, under paragraph 14 of the resolution, that all parties concerned should establish appropriate arrangements for the provision of humanitarian assistance.

5. On 23 October 1997, an agreement was signed between the ECOWAS Committee of Five on Sierra Leone, and a delegation of the Armed Forces Revolutionary Council (AFRC). This agreement established a six-month peace plan and called for the cessation of hostilities, the demobilization of combatants, and the resumption on 14 November 1997 of humanitarian assistance to Sierra Leone to be monitored by ECOMOG and UN military observers. Despite reservations regarding the association of the provision of humanitarian assistance to implementation of the peace accord, humanitarian agencies and organizations offered their cooperation to ECOWAS in establishing formal procedures to clear and process through the border humanitarian exemptions under the UN sanctions and ECOWAS embargo. Unfortunately, perhaps due to a lack of resources and expertise in this matter, ECOWAS has not been in a position yet to clear any humanitarian shipment to Sierra Leone. The lack of ECOWAS clearance has prevented food assistance from entering the country, which has caused over the last four months the complete depletion of the existing food stocks of the humanitarian agencies and NGOs in Sierra Leone. Medicine and other non-food items have been allowed to cross the border until recently when Guinean authorities are now objecting to the crossing of ICRC and MSF consignments of medicine for hospitals. The depletion of relief food stocks in-country, including therapeutic and supplementary feeding is creating an acute humanitarian impact, especially among vulnerable groups such as Internally Displaced Persons (IDPs), refugees, and malnourished children. Furthermore, in light of recent military developments, the need for humanitarian assistance has risen sharply. Military confrontation in and around Freetown and the provincial towns of Bo and Kenema since 7 February has provoked the displacement of large numbers of civilians and has increased the burden of the few remaining health care facilities. Humanitarian NGOs and the ICRC have an acute need of resupply of this assistance in order to allow the continuation of their operations in the affected areas.

6. The mission collected and analyzed information on the humanitarian situation, including the impact of UN sanctions and the ECOWAS embargo, in four main areas: food assistance, health care, population displacement and activities of humanitarian organizations. The analysis of this information by the team focused on the prevailing linkages among the four sectors and the necessity of a comprehensive approach to the situation in Sierra Leone. This interim report presents the initial observations of the team of experts and their recommendations for each of the four areas, to advise the ERC on the response of the UN system to the latest developments of the humanitarian situation

in Sierra Leone. The information contained in this interim report was provided by UN agencies, the ICRC and humanitarian NGOs.

II. Food assistance to vulnerable groups

7. Although 85% of its land is arable, agricultural productivity in Sierra Leone is among the lowest on the globe, making the nation heavily dependent on commercial imports and international assistance to meet its food requirements. According to FAO, over 450,000 metric tons (MT) of various cereals, mainly rice, were required in 1996 to feed the Sierra Leone people. Half of this requirement had to be imported into the country to supplement local production. A quarter of the whole food requirement (110,000 MT) came from international food aid supplied through UN agencies and NGOs. Following the Abidjan Peace Accord in November 1996 and the implementation of major resettlement programs of internally displaced persons in early 1997, the Committee on Food Aid on Sierra Leone composed of United Nations agencies and NGOs engaged in food assistance to Sierra Leone decided to discontinue general feeding programmes. Their new approach focuses on the return of the IDPs through food for work and food for agriculture programs and the distribution of rice and vegetable seeds, and therapeutic and supplementary feedings for the most vulnerable, including the refugees and the unaccompanied children. According to WFP, this change of strategy reduced considerably the food assistance requirements in 1997, during which period 40,000 MT of food (bulgar wheat, maize meal, oil, corn-soya blend, pulse etc) were distributed to targeted vulnerable groups by WFP and humanitarian NGOs. In addition, the substantial distribution of seeds rice and tools by FAO, EU and USAID through ICRC and NGOs prior to the coup and favorable climatic conditions allowed an increase of an estimated 15 % of the rice production at the end of 1997, according to FAO. It gave to some rural areas a certain level of food security for the first semester of 1998. This limited surplus remained in the areas of production due to the increasing instability in 1997 and the lack of fuel under the UN embargo. According to FAO and World Vision, farmers in some areas are forced to consume or sell their seeds, undermining their capacity to replant in the coming month of May.

8. Since the imposition of the ECOWAS embargo on 25 August 1997, ECOWAS members, in particular the Guinean authorities that control the only practical road access for humanitarian convoy to Sierra Leone, have prevented all bulk food assistance from entering Sierra Leone. Despite ECOWAS having agreed to UNOCHA recommendations on sanctions exemptions mechanisms, not a single relief item has crossed the border under the formal mechanism. According to MSF, ACF and Merlin, therapeutic milk were, nevertheless, allowed to cross in small quantities, including by air from Monrovia to Bo and Kenema.

9. The exiled government of President Kabbah expressed its concerns that bulk food may not reach the intended beneficiaries but may be looted by bandits or army units while in transit and stored in warehouses. In a meeting with the mission, President Kabbah stated that rice was being used in Sierra Leone as a "weapon of war". Although rice has not been distributed by UN agencies and humanitarian NGOs for years, ECOWAS members still insisted on the monitoring by ECOMOG

of any substantial amount of food entering the country. Although some food consignments were indeed looted in and around Freetown in the days after the military coup, including over 3,000 MT of WFP food aid, these incidents remained rare and localized to the region of Freetown. WFP, CARE, Catholic Relief Services (CRS) and World Vision were able to transport and distribute in-country stock of food throughout 1997 (approx. 14000 MT) without any major incidents in warehouses or on the road. ICRC confirmed that the security situation in the country in 1997 did not hamper its operation regarding food distribution.

10. The stocks of relief food within Sierra Leone have now been exhausted. According to WFP, its in-country stocks were depleted almost completely by December 1997. CARE, World Vision and CRS also report minimal stocks at the end of January. The impact of reduced food assistance has been offset to some degree by an improved harvest of rice in 1997. Also, continued commercial activity, through smuggling, has filled some of the gap. This commercial activity, however, is not expected to benefit the most vulnerable sections of the population which will not be able to afford the food at sharply increased prices. Some NGOs report that price of rice is up 300% since the coup. To cope with the situation, the population has turned to cassava and other secondary staples that reduced their caloric intake.

11. Although food deficiency has not yet reached alert levels for the majority of the population, pockets of increasingly serious malnutrition are evident and minimal food assistance to these vulnerable people is urgently required, in particular for malnourished children in the therapeutic and supplementary feeding centers (cf. section III). WFP, UNICEF, ICRC and NGOs estimate that the overall requirement of food assistance for therapeutic and supplementary feeding of targeted vulnerable groups amounts to 5000 MT per month. In their view, this assistance may be delivered without maintaining major in-country stocks, diminishing substantially the risk of looting. On a longer term basis, the food deficiency of Sierra Leone will have to be addressed. The 1997 rice harvest will be exhausted in the coming two months, according to WFP, FAO and several NGOs. Significant amounts of food aid may again be needed if programs of seeds transport and distribution are not implemented in the next 90 days. A number of programs for emergency agricultural inputs are being planned by NGOs funded by UNDP, FAO, EU and USAID.

12. Furthermore, the current military activities may have increased the need of food assistance to internally displaced persons, particularly in urban areas, such as Kenema, Bo and Freetown. Food must be provided to IDP camps in these areas, as well as to Liberian refugee camps to ensure a minimum subsistence level of food in these circumstances. The amounts of food required still need to be assessed. It makes however the requirement of 5,000 MT for the vulnerable groups even more urgent and imperative.

III. Nutritional status of vulnerable groups

13. Malnutrition has always been a serious concern in Sierra Leone. According to UNICEF, an estimated 35% of children under five years of age suffer from stunting. Five years of civil war have added to this chronic malnutrition a problem of acute malnutrition or wasting. Since the military coup, the nutritional status of the population has deteriorated further. According to a nutritional survey of Action Contre la Faim (ACF) conducted in December 1996 in Freetown, 5.7 % of children under five years old suffered from Global Acute Malnutrition. ACF could update its data for 1997 in many districts, including Freetown in December 1997. The results of this latest survey show a 53% increase in children suffering from Global Acute Malnutrition and a 100% increase in children suffering from Severe Acute Malnutrition. Other surveys at the country level show rapid deterioration of the nutritional status of the children as a precursory sign of the situation among adults. These signs are confirmed by other figures regarding the nutritional status of the population in relatively unaffected districts such as Makeni, Bombali and Tonkoli which suggest, according to UNICEF, the emergence of significant nutritional problems. The most vulnerable groups remain the children.

14. To respond to the nutritional crisis among children, humanitarian organizations including Medecins Sans Frontieres-Holland, ACF, Merlin and UNICEF, have intensified their supplementary feeding programmes targeted at children under five years of age. According to them, 460 children are currently supported by these projects for therapeutic feeding (severely malnourished children) and 2,500 for the supplementary feeding (moderately malnourished children). Children enrolled in these programmes are particularly vulnerable and totally dependant on the food and intensive medical care provided to them. The four organizations providing this assistance informed the mission that their stock of therapeutic food can cover their needs only for an additional 2 to 4 weeks considering the embargo imposed by ECOWAS. Already, the fatality among these children is rising, such as in Kambia where MSF-Holland reports a 24% increase in admissions in its therapeutic feeding center last December, and an increased fatality of 23%, 10% higher than during the two previous months. The discontinuation of food assistance to these children as a consequence of the ECOWAS embargo will lead to the death of most of these children. It is imperative that the required food assistance located in UN warehouses in Guinea be authorized to enter Sierra Leone promptly to resupply the concerned organizations.

IV. Health status and access to health care.

15. The health status of the Sierra Leone population has been poor. Life expectancy is only 43 years, one of the lowest in the world. In the areas where humanitarian organizations were in a position of assessing the health situation, the current main public health problems were malaria, respiratory infections and outbreaks of epidemic diseases such as measles and lassa fever. According to UNICEF, since May 1997, measles killed at least 400 children under five in the outbreaks reported in the districts of Koinadugu. Cholera was prevented thanks to a program of water chlorination carried out by humanitarian agencies and NGOs. However, this may be

jeopardized if the availability of chlorine is not guaranteed. WHO expects the numbers of epidemic diseases outbreaks to raise as a result of the low coverage of vaccination programs such as the one for measles (43% in 1995) and the collapse of the cold-chain. Other outbreaks of preventable diseases are expected, according to WHO, such as poliomyelitis and meningitis. It should be noted that 14% of the 504 cases of lassa fever reported in 1997 died in Kenema according to WHO, and the outbreak is still going on. The death toll of such diseases will remain high until an early warning mechanism and proper and timely response is established to limit contagion.

16. Until the military coup, according to UNICEF and humanitarian NGOs, 54% of the health care facilities were operational compare to 16% as of early 1998. There were 600 health care centres functioning prior to the coup. Only one third of the population had access to these centres. Since the coup, the number of functioning centres has dwindled to 120. UNICEF therefore estimates that only 1/15 of the population now has access to minimal health care. In all cases, health care is now only provided in the districts assisted by NGO's and international organizations. Consequently, the death rate among hospitalized patients has been rising steadily in the recent months. According to MSF-Belgium, the monthly death rate among patients hospitalized in Pujehun district hospital in November and December 1997 were respectively 16 and 22% , and 18 and 15% in the Bo district hospital. The majority of these deaths occurs within 48 hours after their admission denoting the poor health status of patients at their arrival. The situation remains unknown in the South-East, such as in Bonthe (population: 130 000) and Muyamba (pop.:250 000) districts where very limited assistance has been provided for the last 12 months.

17. In 1996, many essential drugs were available in approx. 70% of the health care facilities. The Ministry of Health is now no longer able to provide the drugs, even the most basic drugs such as paracetamol and penicillin. The availability of drugs since May 1997 is extremely limited causing sharp increase in prices in private pharmacies for essential drugs (ex.: 25% for paracetamol used as a relief for fever and pain to 50% for penicillin that is used for the treatment acute respiratory infection the third prevalent disease among children under five years old). The price of chloroquine used for the treatment of malaria, the first killer disease, has also risen considerably. The prevailing socioeconomic situation makes the drugs out of the reach for most of the population. The situation will certainly worsen in the coming months if drugs are not allowed to cross the border.

18. Although the ECOWAS embargo exempts medicine, and indeed relief organizations have taken, until recently, medical supplies into the country, these have not been sufficient to change the pattern of diseases, according to WHO. In the last two weeks, however, ICRC and MSF have been denied the entry of medical supplies into Sierra Leone, at a time when the need for these drugs is most acute. These trucks were transporting the consignments of drugs and medical supplies for the next three months of operations in major hospitals and health care facilities in the areas the most affected by the increased military activity, including Freetown.

V. Population Displacements

19. At the end of 1996 Sierra Leone had more than 1 million internally displaced persons from five years long civil war. This war also produced 240,000 Sierra Leonean refugees that took up asylum in Guinea and other countries in the subregion. In addition, Sierra Leone provides asylum to 14,000 Liberian refugees, most located at camps in and around Freetown. Several programmes by UNHCR and other agencies were underway in 1997 to repatriate and resettle the displaced populations. Events since May 1997 in Sierra Leone have both impeded repatriation and plans that were underway and have placed refugees from Liberia in extremely precarious circumstances.

20. Deterioration in the situation of all these vulnerable populations has been exacerbated by the inability to mount a cross-border relief operation under the sanctions and the embargo. The displaced populations are particularly dependent on assistance programmes of international agencies because they lack the coping mechanisms available to other vulnerable groups. They have no access to relatives for assistance nor land to cultivate for food.

21. Prior to the military coup, programs were under implementation to resettle Sierra Leone's internally displaced population during 1997. Food for work and targeted-feeding programs managed to achieve the resettlement of over 800,000 Sierra Leone's IDPs. However, the events since the coup disrupted the resettlement process. The period since the coup has led to an additional 160,000 IDPs being registered according to the inter-agency Committee on Food Aid. The actual number displaced is suspected to be much larger; lack of humanitarian access has prevented confirmation. Reports from ICRC and local NGOs indicated that the current deterioration of the security situation is displacing even more persons, particularly around Kenema and Bo and Kono.

22. While some IDPs have shifted to relatives' homes and are relying on them for sustenance, the vast majority are in need of assistance. It is suspected that increased vulnerability has led to some displaced children in urban centres being recruited by military factions. Others, in the absence of food assistance, may have been forced into prostitution and banditry, according to UN agencies and NGOs. According to assessments from NGOs currently operating within Sierra Leone, medical and food assistance to IDPs is urgently required.

23. The resettlement program should resume as soon as security conditions permit. In addition to food assistance, non-food items, shelter and transport will be required. There are currently approximately 430,000 Sierra Leonean refugees in neighbouring countries. According to UNHCR, some 260,000 are in Guinea; 160,000 are in Liberia and 10,000 in other countries. Of these, 77,000 in Guinea arrived in the country since the military coup.

24. Following the peace agreement between the government of Sierra Leone and the RUF signed in Abidjan on 30 November, 1996, plans were in place by March 1997 to promote the voluntary repatriation of over 240,000 Sierra Leoneans refugees. Quick Impact Projects (QIPs) were developed and were progressively being implemented in areas targeted to benefit both returnees and

returning IDPs. According to UNHCR, there are currently 260,000 Sierra Leonean refugees in Guinea, 77,000 of whom entered in Guinea since the military coup. If security conditions improve, the impetus to return, particularly among refugees originating from urban areas, is expected to be substantial especially from Guinea. While many from areas close to their current exile such as Port Loko and Kambia may return spontaneously, arrangements will need to be made, particularly in transport and non-food items, for those from farther away-Freetown, Kenema, Bo. This caseload is mainly in Conakry and Forecariah. Finally, one of the most serious situations currently prevailing in Sierra Leone is that of the 8,000 Liberian refugees stranded in the Freetown area. This group is in an extremely vulnerable situation following a series of displacements beginning in 1991 and now have been caught in the cross-fire of recent days. Given this series of displacements, they have few coping mechanisms at their disposal. The last distribution of assistance took place in August 1997.

25. If developments over recent days result in a situation where safe passage becomes a possibility in Freetown, negotiations with ECOMOG are urgently required to effect evacuation/repatriation of this group by sea to Liberia. The option of by land transfer via Guinea appears much more problematic. UNHCR estimates there to be an additional 6,000 Liberian refugees in Kenema and Bo who are also in need of assistance, both in terms of subsistence and in arrangements being made for voluntary repatriation at the earliest possible time.

VI. Conclusion and recommendations.

26. It appears that without rapid intervention by humanitarian organizations in the coming months, the country will face a large scale food crisis, according to all the UN agencies involved. The extreme vulnerability of certain groups and in certain areas create additional humanitarian needs in terms of food assistance and health care services. UN agencies and NGOs have faced major difficulties in their plan to respond to these needs under the ECOWAS embargo. The difficulties encountered by these operational agencies to ship their humanitarian consignments into Sierra Leone has revealed a major lack of capacity on the side of ECOWAS to administer an exemptions process. Considering that for the last eight months no food assistance has been allowed to enter Sierra Leone, which is known to have an important food deficiency, it is a strong indication of the inadequacy of the procedures adopted by ECOWAS. In time of acute crisis in health care services in Freetown and elsewhere due to the intensification of armed confrontation, the recent blockade of medicine by ECOWAS confirms that the overall procedure needs to be reviewed urgently.

27. Finally, the aggravation of the humanitarian situation as a result of the intensification of the hostilities requires the agencies to review their action plan. Under this new plan for the provision of vital humanitarian assistance, cross-border shipments of humanitarian requirements should be allowed without unnecessary inspections, or other administrative procedures causing delays. Furthermore, UN agencies and humanitarian NGOs should be in a position to offer the necessary guarantees for the adequate and proportionate character of their assistance, the impartiality of their distribution and that such assistance is safely delivered to, and used by, its intended beneficiaries. Considering the fact that no significant security incidents in relation to food distribution took place

for the past 12 months outside the Freetown area, agencies believe that practical steps may certainly be taken to provide these guarantees with the appropriate distribution plan.

28. In light of these observations, the mission would like to recommend to the ERC the following:

- the ERC should draw the attention of the Security Council to the gravity of the humanitarian situation in Sierra Leone and request its intervention to facilitate the import, the transit and the cross-border shipment of humanitarian requirements, under the UN sanctions and ECOWAS embargo;

- the ERC should ask the UN agencies concerned that they review their action plan to respond to the current humanitarian crisis while ensuring that their assistance adequately responds to the situation and is safely delivered to the people in need. The ERC should underline the importance of preserving an impartial access to the civilian population for the purpose of the delivery of humanitarian assistance, not being subject to the control of a particular armed force engaged in the country.

Conakry, 10 February 1998